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PTO/SB/21 (08-03)

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TRANSMITTAL FORM

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/045,199	
	Filing Date	10/22/01	
	First Named Inventor	Sander et al	
	Art Unit	2817	
	Examiner Name	Unassigned	
Total Number of Pages in This Submission		Attorney Docket Number	034942-255

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Copy of Postcard & Change of Address & Change of Attorney Docket Number Previously Filed on March 6, 2003		
<table border="1"><tr><td>Remarks</td><td></td></tr></table>			Remarks	
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

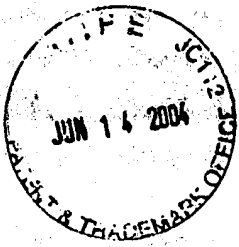
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Serial/Patent No.: <u>10/045,199</u>		Filing/Issue Date: <u>10/22/01</u>	
Applicant: <u>Sander et al.</u>			
Title: <u>Multi-Mode Communications Transmitter</u>			
TRP Docket No.: <u>034942-255</u>		Atty/Secty Initials: <u>EPK/dm</u>	
Date Mailed: <u>3-6-03</u>		Docket Due Date: _____	
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<input type="checkbox"/> Application - Utility (____ pgs. with cover & abstract)	<input type="checkbox"/> ____ Pieces of Prior Art enclosed		
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Docket Number and Change of Address Notice; and Status		Patent Code:	
Request Letter		Client/Matter # <u>34942 - 255</u>	

